

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90072 018 ***150.00

DOCUMENT # P03000037197

1. Entity Name

HARVEST LAND INVESTMENT II, INC.



Principal Place of Business

2900 NW 75TH ST
MIAMI FL 33147

Mailing Address

2900 NW 75TH ST
MIAMI FL 33147

2. Principal Place of Business

5151 NW 165 street

Suite, Apt. #, etc.

3. Mailing Address

5151 NW 165 street

Suite, Apt. #, etc.

City & State

Miami Lakes, FL

Zip
33014

Country

U.S.A

City & State

Miami Lakes, FL

Zip
33014

Country

U.S.A

4. FEI Number

061687978

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

LIU CHAO, YI HSIU
12177 NW 9TH DR
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Yi-Hsin Lin CHAO

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/1/04

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE DP
NAME SAN CHAO, TAI
STREET ADDRESS 1765 EAGLE TRACE BLVD E
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE DV
NAME ROSA, BARRY
STREET ADDRESS 10210 NW 5TH ST
CITY-ST-ZIP PEMBROKE PINES FL 33026 ☐ Delete

TITLE DTS
NAME LIU CHAO, YI HSIU
STREET ADDRESS 12177 NW 9TH DR
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME CHAO, TAI SAN
STREET ADDRESS 1765 Eagle Trace Blvd E
CITY-ST-ZIP Coral springs, FL 33071 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DTS
NAME CHAO, Yi-Hsin Lin
STREET ADDRESS 12177 NW 9th Dr
CITY-ST-ZIP Coral springs, FL 33071 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Yi-Hsin Lin CHAO

Yi-Hsin Lin CHAO

2/1/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #